

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS350AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 12/07/2010
NAME OF PROVIDER OR SUPPLIER ST ROSE RETIREMENT HOME I		STREET ADDRESS, CITY, STATE, ZIP CODE 3164 HEBARD DRIVE LAS VEGAS, NV 89121		
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Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of a complaint investigation conducted in your facility from 11/10/10 to 12/7/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility received the grade of D.</p> <p>The facility is licensed for eight Residential Facility for Group beds for elderly and disabled persons, Category I residents. The census at the time of the survey was six. Six resident files were reviewed and eight employee files were reviewed.</p> <p>Complaint #NV00026915 - The allegations regarding physical environment, appropriate resident placement, lack of qualified caregivers and resident rights were substantiated. See TAG's Y026, Y105, Y106, Y181, and Y276.</p>	Y 000		
Y 005 SS=C	<p>449.179(3)(b) Licensing-Zoning Compliance</p> <p>NAC 449.179 3. Before issuing a license to operate a residential facility, the bureau shall inspect the facility to ensure that it complies with: (b) The applicable zoning ordinances and regulations.</p>	Y 005		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 053	Continued From page 2 NAC 449.194 The administrator of a residential facility shall: 4. Ensure that the records of the facility are complete and accurate. This Regulation is not met as evidenced by: Based on record review, observation and interview on 11/10/10, the administrator failed to keep the records of the facility complete and accurate. Severity: 1 Scope: 3	Y 053			
Y 088 SS=C	4493199(4) Staffing Schedule NAC 449.199 4. The administrator of a residential facility shall maintain monthly a written schedule that includes the number and type of members of the staff of the facility assigned for each shift. The schedule must be amended if any changes are made to the schedule. The schedule must be retained for at least 6 months after the schedule expires. This Regulation is not met as evidenced by: Based on record review and interview on 11/10/10, the administrator failed to maintain a monthly staffing schedule that needs to be retained for at least six months. Severity: 1 Scope: 3	Y 088			

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Y 103	Continued From page 3	Y 103			
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A / Tuberculosis NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. This Regulation is not met as evidenced by: Based on record review on 11/10/10, the facility failed to ensure 5 of 8 employees complied with NAC 441A.375 regarding tuberculosis (TB) testing for the protection of all residents (Employee #2 and #3 - failed to have evidence of a two-step TB test, #1 - failed to have evidence of a second step TB test, #5 - failed to have evidence of annual signs and symptoms and #8 - failed to have a pre-employment physical). This is a repeat deficiency from the 7/1/09 State Licensure survey. Severity: 2 Scope: 3	Y 103			
Y 105 SS=E	449.200(1)(f) Personnel File - Background Check NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.	Y 105			

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Y 105	Continued From page 4 This Regulation is not met as evidenced by: Based on record review on 11/10/10, the facility failed to ensure 4 of 8 employees met background check requirements of NSR 449.176 to 449.188 (Employee #1 - failed to have evidence of a signed criminal history statement, #2 and #3 - failed to have evidence of a signed criminal history statement, fingerprints, state and FBI background check, and #8 - the state result in the file was rejected and the file failed to contain evidence of and FBI check). Severity: 2 Scope: 2	Y 105			
Y 106 SS=F	449.200(2)(a) Personnel File - 1st aid & CPR NAC 449.200 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1, (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation. This Regulation is not met as evidenced by: Based on interview and record review on 11/10/10, the facility failed to ensure the only caregiver on duty (Employee #1) had completed training in first aid and cardiopulmonary resuscitation (CPR), affecting all residents. Severity: 2 Scope: 3	Y 106			

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Y 181	Continued From page 5	Y 181			
Y 181 SS=I	<p>449.209(8) Health and Sanitation-Temperature</p> <p>NAC 449.209</p> <p>8. The temperature of the facility must be maintained at a level that is not less than 68 degrees Fahrenheit and not more than 82 degrees Fahrenheit.</p> <p>This Regulation is not met as evidenced by: Based on observations and interviews on 11/10/10, the facility failed to maintain the temperature between 68-82 degrees Farenheit.</p> <p>Findings included:</p> <p>Upon entry into the facility at 10:00 AM, the temperature measured 63 degrees on a portable thermometer. Resident #1 was observed in his bedroom under a blanket in his bed. Resident #2 was observed to be wearing a sweater with his arms folded around his waist and shivering. Resident #3 was observed to be wearing a heavy winter sweater and stated it was always cold in the facility. Resident #4 was observed in her bedroom wearing a sweater and a winter coat. Resident #4 stated she was grateful she had a warm winter coat and extra blankets. Resident #4 stated the facility was always cold, when the residents ask the caregivers to turn up the heat they fail to respond.</p> <p>When asked why the home was so cold, the caregiver reported he did not know, he did not have a key to either of the thermostats in the facility. Both thermostats in the home were covered with a plastic cover and secured with a</p>	Y 181			

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Y 181	Continued From page 6 lock. The caregiver onsite at the facility stated he did not have a key to the thermostat. One thermostat was observed to be set in the off position, and the other thermostat was set to air conditioning. The administrator was contacted, she came to the facility and with the assistance of another caregiver found the key to the thermostat and turned on the heat. Severity: 3 Scope: 3	Y 181			
Y 276 SS=D	449.2175(7) Nutrition and Service of Food NAC 449.2175 7. Meals must be nutritious, served in an appropriate manner, suitable for the residents and prepared with regard for individual preferences and religious requirements. At least three meals a day must be served at regular intervals. The times at which meals will be served must be posted. Not more than 14 hours may elapse between the meal in the evening and breakfast the next day. Snacks must be made available between meals for the residents who are not prohibited by their physicians from eating between meals. This Regulation is not met as evidenced by: Based on observation and interview on 11/10/10, the facility failed to provide meals and snacks suitable to the needs of 2 of 6 residents. Severity: 2 Scope: 1	Y 276			

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Y 621	Continued From page 7	Y 621		
Y 621 SS=D	<p>449.2702(4)(b) Admission Policy</p> <p>NAC 449.2702 4. Except as otherwise provided in NAC 449.275 and 449.2754, a residential facility shall not admit or allow to remain in the facility any person who: (b) Requires restraint.</p> <p>This Regulation is not met as evidenced by: NAC 449.2702 6. As used in this section: (b) "Restraint" means: (1) A psychopharmacologic drug that is used for discipline or convenience and is not required to treat medical symptoms; (2) A manual method for restricting a resident's freedom of movement or his normal access to his body; or (3) A device or material or equipment which is attached to or adjacent to a resident's body that cannot be removed easily by the resident and restricts the resident's freedom of movement or his normal access to his body.</p> <p>Based on observation, interview and record review on 11/10/10, the facility failed to ensure 1 of 6 residents was not restrained with the use of full side bed rails (Resident #1).</p> <p>Severity: 2 Scope: 1</p>	Y 621 Y 621		
Y 859 SS=D	449.274(5) Periodic Physical examination of a resident	Y 859		

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Y 859	Continued From page 8 NAC 449.274 5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician. This Regulation is not met as evidenced by: Based on record review on 11/10/10, the facility failed to ensure that 1 of 6 residents received a physical before admission (Resident #3). Severity: 2 Scope: 1	Y 859			
Y 936 SS=E	449.2749(1)(e) Resident file-NRS 441A Tuberculosis NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto. This Regulation is not met as evidenced by:	Y 936			

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Y 936	Continued From page 9 Based on record review on 11/10/10, the facility failed to ensure 3 of 6 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #1 and #5 - failed to have evidence of a two-step TB test, #3 - failed to have evidence of a second-step TB test). This is a repeat deficiency from the 8/17/10 State Licensure survey. Severity: 2 Scope: 2	Y 936			
Y9999	Final Observations NAC 449.0114 Display of license; compliance with law; transfer of real property; change in administrator, ownership, location or services. (NRS 449.037 <../NRS/NRS-449.html>, 449.050 <../NRS/NRS-449.html>) 1. Upon receipt of a license, the licensee shall display the license at a conspicuous location within the facility. Based on observation on 11/10/10, the facility failed to ensure the current original BELTCA license for the facility's Administrator was posted. Severity: 1 Scope : 3	Y9999			

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